SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS				Use separate sch for each category Detailed Summar	nedule(s) of the	FOR LINE NUMBER: PAGE 141 OF 143 (check only one) X 17	
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\rangle	NAME OF COMMI	, ,					
۹.	Full Name (Last, First, Middle Initial) JOHNNY'S HALFSHELL Mailing Address 400 NORTH CAPITOL STREET NW					Date of Disbursement 03 13 2015	
	City State Zip Code WASHINGTON DC 20001					Amount of Each Disbursement this Period 1133.70 Transaction ID: SB17.I2153	
	Purpose of Disbursement FOOD & BEVERAGES Candidate Name				Category/ Type		
	Office Sought:	House Senate President District:	Disbursement For: Primary Other (sp	General	7,10	[MEMO ITEM]	
3.	Full Name (Last, First, Middle Initial) ST. REGIS HOTEL Mailing Address 2500 DEER VALLEY DRIVE				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State Zip Code PARK CITY UT 84060 Purpose of Disbursement LODGING Candidate Name				Category/ Type	Amount of Each Disbursement this Period 637.29 Transaction ID : SB17.I2154 [MEMO ITEM]	
	Office Sought:	House Senate President District:	Disbursement For: Primary Other (sp	General	туре		
Э.	Full Name (Last, First, Middle Initial) CENTURYLINK Mailing Address P.O. BOX 91154				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State Zip Code SEATTLE WA 98111 Purpose of Disbursement TELEPHONES Candidate Name				Category/ Type	Amount of Each Disbursement this Period 268.40 Transaction ID : SB17.I2171	
	Office Sought: State:	House Senate President District:	Disbursement For: Primary Other (s	General			
						268.40	

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....